

REQUEST FORM FOR MOBILE DEVICE SERVICE

Employee Name: _____ **Department** _____

Receiving the phone

SECTION I

- County Issued Mobile device request
- County Issued Mi-Fi
- County issued Sim card Only

Justification of the Need for Mobile Device: (select all that apply)

- Spends an extended amount of time away from his/her workstation.
- Needs to be reached immediately.
- Is on call outside of normal hours.
- Makes frequent and prolonged travel and needs access to email and/or other County systems

Type of access requested;

- Voice
- Data
- Hot Spot, Justification: _____
- Sim card only.

SECTION II

- Request to add County email

To be filled out by personnel receiving the phone:

I acknowledge that I will comply with the following:

- Create a Gmail account and provide password: Gmail _____ Pswrd: _____
- Password Protected. (Lock pin) _____
- Device set to Auto Lock.
- I.T.'s ability to access my Phone.
- I will notify I.T. in the event that my Phone is Stolen or lost.
- I.T.'s ability to wipe my Phone without prior notice.
- It is my responsibility to have a backup of my phone's content.

SECTION III

Department Head or Elected Official: _____ Date: _____

Employee Signature: _____ Date: _____

(Signature indicates employee has read and understands the Mobile Device Policy and agrees to the above.)

I.T. Representative: _____ Date: _____

***** This section is for IT use only *****

- **Funds approved form Auditor on:** _____
- **Order date:** _____
- **Type of Device, Make and Model, or Sim card only IMEI:** _____
- **Phone number of Device:** _____

How to fill out this Form

1. Must be requested from a Director or an Elected Official for an employee.
2. Contact Auditor for Validation of funds
3. After funds approval. IT will send a list of available devices to pick from. (Apple products are Not Supported)
4. Inform IT which device(s) were selected so IT can place order.
5. If budget amendment is needed, please contact the Auditor's office.
6. Director or Elected Official must Select "SECTION I" and all that applies.
7. SECTION II to be filled out by person receiving the Device.
8. Director or Elected Official must Sign "Section III", prior to the ordering of a device.
9. Upon Arrival of County device employee (person receiving the device) will fill out section II and sign section III to have his/her email set-up.
10. I.T. representative will complete the form.
11. One copy is kept by the Department Head or Elected official.

Point of Contact for this Document is Information Technology @ 498-4065